

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

E-04100A

Southwest Transmission Cooperative, Inc.

PO Box 2195

Benson, AZ 85600

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ANNUAL REPORT

RECEIVED

DEC 13 2004

FOR YEAR ENDING **AZ CORPORATION COMMISSION**
DIRECTOR OF UTILITIES

12	31	2003
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FOR COMMISSION USE

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PROCESSED BY:

SCANNED

COMPANY INFORMATION

Company Name (Business Name) <u>Southwest Transmission Cooperative, Inc.</u>			
Mailing Address <u>P.O. Box 2195</u>			
(Street)			
<u>Benson</u>	<u>Arizona</u>	<u>85602</u>	
(City)	(State)	(Zip)	
<u>(520) 586-5599</u>	<u>(520) 586-5279</u>	<u>N/A</u>	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Email Address <u>webmaster@aztouchstoneenergy.com</u>			
Local Office Mailing Address <u>same as above</u>			
(Street)			
<u>same as above</u>	<u>same as above</u>	<u>same as above</u>	
(City)	(State)	(Zip)	
<u>same as above</u>	<u>same as above</u>	<u>same as above</u>	
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Email Address <u>same as above</u>			

MANAGEMENT INFORMATION

Management Contact: <u>Larry Huff</u> <u>Senior Vice President and Chief Operating</u>			
(Name)		(Title)	
<u>Officer</u>			
<u>P.O. Box 2195 Benson, Arizona 85602</u>			
(Street) (City) (State) (Zip)			
<u>(520) 586-5210</u>	<u>(520) 586-5279</u>	<u>N/A</u>	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Email Address <u>lhuff@swtransco.coop</u>			
On Site Manager: <u>same as above</u>			
(Name)			
<u>same as above</u>	<u>same as above</u>	<u>same as above</u>	
(Street)	(City)	(State)	(Zip)
<u>same as above</u>	<u>same as above</u>	<u>same as above</u>	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Email Address <u>same as above</u>			

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: Patrick F. Ledger
(Name)

1000 S. Hwy 80 Benson, Arizona 85602
(Street) (City) (State) (Zip)

(520) 586-5455 (520) 586-5575 N/A
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

Attorney: same as above
(Name)

same as above
(Street) (City) (State) (Zip)

same as above
Telephone No. (Include Area Code) Fax No. (Include Area Code) Pager/Cell No. (Include Area Code)

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

OWNERSHIP INFORMATION

Check the following box that applies to your company:

- | | |
|--|---|
| <input type="checkbox"/> Sole Proprietor (S) | <input type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P) | <input type="checkbox"/> Subchapter S Corporation (Z) |
| <input type="checkbox"/> Bankruptcy (B) | <input type="checkbox"/> Association/Co-op (A) |
| <input type="checkbox"/> Receivership (R) | <input type="checkbox"/> Limited Liability Company |
| <input checked="" type="checkbox"/> Other (Describe) <u>Cooperative Corporation IRC 501(c)12</u> | |

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- | | | |
|--|---|--|
| <input type="checkbox"/> APACHE | <input checked="" type="checkbox"/> COCHISE | <input type="checkbox"/> COCONINO |
| <input type="checkbox"/> GILA | <input checked="" type="checkbox"/> GRAHAM | <input checked="" type="checkbox"/> GREENLEE |
| <input type="checkbox"/> LA PAZ | <input type="checkbox"/> MARICOPA | <input checked="" type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO | <input checked="" type="checkbox"/> PIMA | <input checked="" type="checkbox"/> PINAL |
| <input checked="" type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI | <input type="checkbox"/> YUMA |
| <input type="checkbox"/> STATEWIDE | | |

SERVICES AUTHORIZED TO PROVIDE

Check the following box/es for the services that you are authorized to provide:

☒ **Electric**

- ☐ Investor Owned Electric
- ☒ Rural Electric Cooperative
- ☐ Utility Distribution Company
- ☐ Electric Service Provider
- ☒ Transmission Service Provider
- ☐ Meter Service Provider
- ☐ Meter Reading Service Provider
- ☒ Billing and Collection
- ☒ Ancillary Services
- ☐ Generation Provider
- ☐ Aggregator/Broker

☐ **Telecommunications**

- ☐ Incumbent Local Exchange Carrier
- ☐ Interexchange Carrier
- ☐ Competitive Local Exchange Carrier
- ☐ Reseller
- ☐ Alternative Operator Service Provider

☐ **Gas**

- ☐ Natural Gas
- ☐ Propane

☐ **Other (Specify)** _____

STATISTICAL INFORMATION

TELECOMMUNICATION UTILITIES ONLY

Total residential access lines	_____
Total business access lines	_____
Total revenue from Arizona operations	\$ _____
Total income from Arizona operations	\$ _____
Value of assets used to serve Arizona customers	\$ _____
Accumulated depreciation associated with those assets	\$ _____

STATISTICAL INFORMATION (CONT'D)

ELECTRIC UTILITY PROVIDERS ONLY

Total number of customers	_____ 0 _____
Residential	_____ 0 _____
Commercial	_____ 0 _____
Industrial	_____ 0 _____
Public street and highway lighting	_____ 0 _____
Irrigation	_____ 0 _____
Resale	_____ 0 _____
 Total kilowatt-hours sold	_____ 0 _____ kWh
Residential	_____ 0 _____
Commercial	_____ 0 _____
Industrial	_____ 0 _____
Public street and highway lighting	_____ 0 _____
Irrigation	_____ 0 _____
Resale	_____ 0 _____
 Maximum Peak Load	_____ 0 _____ MW

GAS UTILITIES ONLY

Total number of customers	_____
Residential	_____
Commercial	_____
Industrial	_____
Irrigation	_____
Resale	_____
 Total therms sold	_____ therms
Residential	_____
Commercial	_____
Industrial	_____
Irrigation	_____
Resale	_____

**VERIFICATION
AND
SWORN STATEMENT
Intrastate Revenues Only**

RECEIVED

VERIFICATION

STATE OF Arizona
I, THE UNDERSIGNED
OF THE

COUNTY OF (COUNTY NAME)	Cochise
NAME (OWNER OR OFFICIAL) TITLE	Don Kimball, President & Chief Executive Officer
COMPANY NAME	Southwest Transmission Cooperative, Inc.

DEC 18 2004

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2003

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2003 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

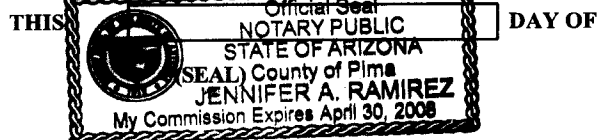
\$ 0

(THE AMOUNT IN BOX ABOVE
INCLUDES \$ _____
IN SALES TAXES BILLED, OR COLLECTED)

****REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

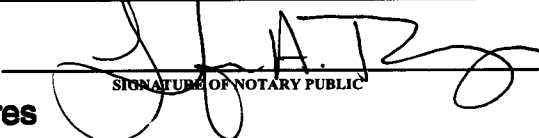




SIGNATURE OF OWNER OR OFFICIAL
(520) 586-5110

TELEPHONE NUMBER

COUNTY NAME	Cochise
MONTH	December 2004



SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES **My Commission Expires**
April 30, 2008

FINANCIAL INFORMATION

Attach to this annual report a copy of the companies' year-end (Calendar Year 2003) financial statements. If you do not compile these reports, the Utilities Division will supply you with blank financial statements for completion and filing. **ALL INFORMATION MUST BE ARIZONA-SPECIFIC AND REFLECT OPERATING RESULTS IN ARIZONA.**